

PESTICIDE APPLICATION RECORD (Version 2)

NOTE: Application information must be completed same day as the application and must be retained for seven years (Ref. chapter 17.21 RCW)

1. Name & Address of Person for Whom Pesticide was Applied:  .....  .....  .....  .....				2. Applicator Name and Address (if different from #1):  .....  .....  .....  Tel. No. .... Lic. No. ....				
3. Full, complete address or exact location of application. (NOTE: If the application is made to one acre or more of agricultural land, the field location must be shown on the map on page two of this form.)				4. Misc. Info:				
5. Date and Time of Application (Start and Stop)	6. Crop or Site Treated	7. Acres Treated (or other measure)	8. FULL PRODUCT NAME	9. EPA Registration Number	10. Amount of Product Applied		11. Concentration	12. Weather Conditions, (wind direction, velocity, temperature). Apparatus License Plate No. and Name and License No. of person(s) who applied pesticide
					Rate per acre (or other measure)	Total Product Applied		
	<input type="checkbox"/> Air <input type="checkbox"/> Ground <input type="checkbox"/> Chemigation		..... ..... ..... ..... .....	..... ..... ..... ..... .....	..... ..... ..... ..... .....	..... ..... ..... ..... .....		
	<input type="checkbox"/> Air <input type="checkbox"/> Ground <input type="checkbox"/> Chemigation		..... ..... ..... ..... .....	..... ..... ..... ..... .....	..... ..... ..... ..... .....	..... ..... ..... ..... .....		
	<input type="checkbox"/> Air <input type="checkbox"/> Ground <input type="checkbox"/> Chemigation		..... ..... ..... ..... .....	..... ..... ..... ..... .....	..... ..... ..... ..... .....	..... ..... ..... ..... .....		
	<input type="checkbox"/> Air <input type="checkbox"/> Ground <input type="checkbox"/> Chemigation		..... ..... ..... ..... .....	..... ..... ..... ..... .....	..... ..... ..... ..... .....	..... ..... ..... ..... .....		

**Location of Application** (If the application covers more than one township or range, please indicate the township & range for the top left section of the map only:

Township: ..... N

Range: E OR W (please indicate) .....

Section(s): .....

Block: ..... Farm Unit: .....

or GPS: .....

County: .....

**PLEASE NOTE:**

*The map is divided into 4 sections with each section divided into quarter-quarter sections. Please complete it by marking the appropriate section number(s) on the map and indicate as accurately as possible the location of the area treated.*

Section: .....				Section: .....			
Section: .....				Section: .....			

N

One Mile

# INSTRUCTIONS

## Pesticide Application Record (Version 2) AGR 4235 (Rev. 5/03)

---

1. Include first and last name.
2. If the person's name is the same as No. 1, write "same" in the space for the licensed applicator's name and include the license number (if applicable) and telephone number.
3. Agricultural land includes such areas as forest lands and range lands. It does not include transportation and utility rights-of-way.
4. This space is available for any additional information you may wish to include.
5. Date may be spelled out or indicated numerically. Application start and stop times must be indicated. Time may be indicated as start and stop times.
6. Indicate type of land or site treated, not location. Examples: Wheat, apples, rights of way, lawn, trees and shrubs, crawl space, wall voids, etc.
7. May also be stated in terms such as linear feet, cubic feet, etc. (Specify the term to which the number refers.) If spot treatment, write spot treatment.
8. Brand name found on the pesticide label including adjuvants (buffer, surfactant, etc.).
9. This number is found on the pesticide container label. If the material is being applied under a federal experimental use permit and no EPA Reg. No. exists, list the federal experimental use permit number. If the material is a spray adjuvant (buffer, spreader, sticker, etc.) write "adjuvant" in this space.
10. Rate per acre: Other measures may include amount/sq. ft., amount/linear ft., etc. Specify the term to which the number refers. Total product applied is the total product applied between start and stop times.
11. This may be listed in various ways, such as: amount of product/100 gallons water, percent formulation in the tank mix (i.e. 1%), gallons per acre of output volume, ppm (or other measure), or inches of water applied (chemigation). Specify the term to which the number refers.
12. Weather conditions must include the direction from which the wind is blowing, measure velocity in mph. If the wind varies in direction and velocity during the application, please indicate the range of variance (i.e. S-SW 3-7 mph). Temperature must also be indicated in degrees Fahrenheit and may be listed as the range encountered during the application. Wind temperature readings shall be obtained in close proximity to the application site.

The apparatus license plate number does not apply to private applicators or public agencies. Include first and last name(s) of person(s) who applied the pesticide.

Include license number(s) if applicable.